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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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02/26/02
1C542 JLS

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 42390P13004

First Inventor or Application Identifier Kelan C. Sylvester

Title AN APPARATUS AND METHOD FOR AN AUDIO CHANNEL SWITCHING

Express Mail Label No. EL651845918US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

1. Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification Total Pages 38
(preferred arrangement set forth below)
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C.113) Total Sheets 20

5. Oath or Declaration Total Pages 4
a. Newly executed (original or copy)
b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. Application Data Sheet. See 37 CFR 1.76.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
a. Computer Readable Form (CFR)
b. Specification Sequence Listing on:
i. CD-ROM or CD-R (2 copies); or
ii. Paper
c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)

11. English Translation Document (if applicable)

12. Information Disclosure Statement (IDS)/PTO - 1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Nonpublication Request under 35 USC 122(b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent

17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____/

Prior application Information: Examiner _____ Group/Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number of Bar Code Label



Correspondence address below

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Name

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Signature

Date 02/26/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
1374.00

Complete if Known

Application Number	
Filing Date	02/26/02
First Named Inventor	Kelan C. Silvester
Examiner Name	
Group Art Unit	
Attorney Docket Number	42390P13004

METHOD OF PAYMENT (check one)

Check Credit Card Money Order Other None

Deposit Account

Deposit Account Number
02-2666
Deposit Account Name
Blakely, Sokoloff, Taylor & Zafman

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application.
 Charge fee(s) indicated below, except for the filing fee, to the above-identified deposit account

FEE CALCULATION (continued)

3. ADDITIONAL FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet.	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920	112 920 Requesting publication of SIR prior to Examiner action	
113	1,840	113 1,840 Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for response within first month	
116	400	216 200 Extension for response within second month	
117	920	217 460 Extension for response within third month	
118	1,440	218 720 Extension for response within fourth month	
128	1,960	228 980 Extension for response within fifth month	
119	320	219 160 Notice of Appeal	
120	320	220 160 Filing a brief in support of an appeal	
121	280	221 140 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidably	
141	1,280	241 640 Petition to revive - unintentionally	
142	1,280	242 640 Utility issue fee (or reissue)	
143	460	243 230 Design issue fee	
144	620	244 310 Plant issue fee	
Total Claims	39	-20** = 19 X \$18.00 = 342.00	
Independent Claims	6	-3** = 3 X \$84.00 = 252.00	
Multiple Dependent			
Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Description	
103	18	203 9 Claims in excess of 20	
102	84	202 42 Independent claims in excess of 3	
104	280	204 140 Multiple Dependent claim	
109	84	209 42 **Reissue independent claims over original patent	
110	18	210 9 **Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)	(\$)	594.00	
* or number of previously paid, if greater; For Reissues, see above			
* Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$)
			40.00

SUBMITTED BY

Typed or
Printed Name

Joseph Lutz, Reg. No. 43,765

Complete (if applicable)

Reg. Number

Signature

Date

02/26/02

Deposit Account User ID

02-2666

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.